

## **MEDICAID-PEACHCARE – Banner Notification 9/15/2003: IMPORTANT UPDATE FOR PHARMACY PROVIDERS**

**Effective 10/1/2003, Georgia Medicaid will remove the brand MAC exclusions on the Oral Contraceptive products listed below. The generics for these products have historically paid at the GMAC; the brands have been excluded in the past. As of 10/1, Georgia Medicaid will remove the brand exclusions from the GMAC for:**

***Ortho Cyclen***

***Ortho-Novum 10/11***

***Demulen 1/35***

***Demulen 1/50***

***Desogen and Ortho-Cept***

***Levlen***

***Tri-Levlen***

***Levlite***

***Mircette***

**LOVENOX® and KINERET® BILLING ERRORS: ALWAYS BILL IN MILLILITERS (mls)**  
**Our audits reveal a high volume of billing errors with Lovenox and Kineret. Please know that both Lovenox and Kineret should always be submitted using the number of (mls) dispensed, under “quantity billed”.**

**Always submit claims for both Lovenox and Kineret in number of “mls” dispensed.**

**NEW LABELERS**

QOL MEDICAL (LABELER CODE 67871)	10/01/2003
VISION PHARMA, LLC (LABELER CODE 68013)	10/01/2003
RIVER’S EDGE PHARMACEUTICALS (LABELER CODE 68032)	01/01/2004
OVATION PHARMACEUTICALS, INC. (LABELER CODE 67386)	01/01/2004
PALMETTO PHARMACEUTICALS INC. (LABELER CODE 68134)	01/01/2004

**REINSTATED LABELERS**

C.O. TRUXTON, INC. (LABELER CODE 00463)	10/01/03
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**VOLUNTARILY TERMINATED LABELERS**

HORUS THERAPEUTICS (LABELER CODE 59229).	01/01/04
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**Please share this information with appropriate staff. If you have additional questions or concerns regarding this notification, please contact Express Scripts at 1-877-650-9340.**